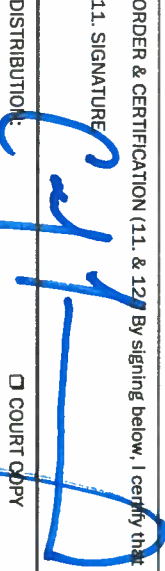


UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 02/2015)				TRANSCRIPT ORDER Please use one form per court reporter. CJA counsel please use Form CJA24 Please read instructions on next page.				COURT USE ONLY DUE DATE:						
1a. CONTACT PERSON FOR THIS ORDER Carl W. Fleetwood				2a. CONTACT PHONE NUMBER (415) 773-5442				3. CONTACT EMAIL ADDRESS cfleetwood@orrick.com						
1b. ATTORNEY NAME (if different) Robin A. Linsenmayer				2b. ATTORNEY PHONE NUMBER (650) 614-7423				3. ATTORNEY EMAIL ADDRESS rlinsenmayer@orrick.com						
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Orrick - 405 Howard Street San Francisco, CA 94105				5. CASE NAME Waymo LLC v. Uber Technologies, Inc. et al				6. CASE NUMBER 17cv00939-WHA						
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX) → <input type="checkbox"/> FTR Debra Pas				8. THIS TRANSCRIPT ORDER IS FOR: <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) <input type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL CJA: Do not use this form; use Form CJA24.										
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:														
a. HEARING(S) (OR PORTIONS OF HEARINGS)			b. SELECT FORMATS (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)					c. DELIVERY TYPE (Choose one per line)						
DATE	JUDGE (Initials)	TYPE (e.g. CMC)	PORTION (If requesting less than full hearing, specify portion (e.g. witness or time))	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
12/04/2017	WHA	pre-trial		<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC: Please email the transcript to cfleetwood@orrick.com														
ORDER & CERTIFICATION (11. & 12) By signing below, I certify that I will pay all charges (deposit plus additional).											12. DATE 12/05/2017			
11. SIGNATURE 														
DISTRIBUTION: <input type="checkbox"/> COURT COPY				<input type="checkbox"/> TRANSCRIPTION COPY				<input type="checkbox"/> ORDER RECEIPT				<input type="checkbox"/> ORDER COPY		